

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.

BIO-77

First Named Inventor or Application Identifier

Assaf Govari

Express Mail Label No.

EJ476787668US

APPLICATION ELEMENTS

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 202311. ☒ Fee Transmittal Form (attached hereto in duplicate)2. ☒ Specification [Total Pages 26]

(Preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☒ Drawing(s) (35 USC 113) [Total Sheets 11]

4. Oath or Declaration

- a. ☐ Newly executed (original or copy)
- b. ☒ Unexecuted original
- c. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional check boxes 5 and 16)
 - i. ☐ Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

5. ☐ Incorporation by Reference
(useable if Box 4c is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.6. ☐ Microfiche Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence

Submission (if applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- 8. ☐ Assignment Papers (cover sheet & document(s))
- 9. ☐ 37 CFR 3.73(b) Statement
(when there is an assignee) ☐ Power of Attorney
- 10. ☐ English Translation Document (if applicable)
- 11. ☒ Information Disclosure Statement
(IDS)/PTO-1449 ☒ Copies of IDS Citations
- 12. ☐ Preliminary Amendment
- 13. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- 14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No:

17. For this divisional application, please cancel original Claims of the prior application before calculating the filing fee.

18. CORRESPONDENCE ADDRESS

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19. TELEPHONE CONTACT

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19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME

Louis J. Capezzuto

Reg. No. 37,107

SIGNATURE

DATE

March 11, 1999

JCS420.S. PTO
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